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HOSPITALS ON BLACKWELL'S ISLAND, NEW YORK.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—In the first article which I wrote for your Journal, I mentioned the medical department on this Island. It is my intention at this time to give a more detailed account of the hospitals here. For the month of October I have been appointed, by the Resident Physician, to the Penitentiary and Smallpox hospitals, with Dr. Blakeman, another of the assistants, as my associate. There are, at present, about 125 in the female, and 45 in the male hospital, a large majority of whom are afflicted with syphilis in some form or other. Most of them are primary cases, many secondary, and some have primary, secondary and tertiary syphilis, having superadded the recent disease to their old and constitutional symptoms. Chancres, buboes, nodes, ulcers, eruptions, &c. &c., are all co-existing in several of these. Among the most interesting cases in the female hospital, is one of rupia, of eighteen months' standing. The poor girl has been through the whole list of anti-syphilitic remedies. She had taken mercury in various forms, and iodide of potassium in large quantities. The latter remedy has been found most reliable, and, with fresh air and a generous diet, is rapidly effecting her cure. At this time her skin is cleaning finely, and her general health very much improved.

There is also a patient here who says she has never menstruated. She is over 16 years of age, and from her deficient development her story of the retention of the menses seems probable. Still she has been a prostitute for three years, and now has primary syphilis. In short, this hospital seems to be a sort of rendezvous for the abandoned women of the city who become infected, or so much reduced by dissipation as to be unable to follow their wretched mode of life. If they become diseased, they go to the police, make it known, and are sent up here as vagrants, for thirty, sixty or ninety days. Here they are cured, perhaps before their time is out, when they have only to send to some "friend," who very kindly gets a writ of habeas corpus, and takes them away. In the course of a month, and often in less time, they return to the Hospital, either with "the disease," or they are committed for drunkenness, rioting or vagrancy. It has been suggested that such an establishment, supported by the city, and conducted in this manner, is

doing more harm than good. It seems to be a place of refuge for these women to recruit themselves, in order to return to their haunts and avocations with renewed health. They know that such a place is provided for them if they are sick, and they take no thought for the morrow.

The patients in the male hospital consist of prisoners sent up here for petty crimes, and who have either contracted this disease or become ill while here. Among them, at this time, is a patient who first became infected about six years ago, and has been diseased ever since. At times the local symptoms have been subdued, but the poison was never wholly eradicated from his system. He says the only chancre he ever had was near the umbilicus (a curious place); but buboes appeared in the groin as usual. The palatine and nasal bones have exfoliated, and he suffers excruciating pains at night. He, too, has been thoroughly medicated, and at this time is taking twenty grains of iodide of potassium daily. He is allowed a generous diet, and appears to be improving.

There are several cases of phymosis in the hospital, upon some of which I have operated by slitting up the prepuce with a bistoury, and others by circumcision.

Another disease which we have to treat here, is delirium tremens. Prisoners are sent up after months of intemperance, and during an attack of this kind I generally treat them with purgatives, sometimes combined with an emetic of ipecacuanha, followed by large doses of opium, either in tincture or substance. And it is astonishing in what quantities they will take this narcotic without being affected. To one man, smaller doses having failed, an ounce of laudanum was exhibited, without apparently affecting him in the least. He continued to cry out that the "blue devils" were after him, until I gave him a grain of morphine, and he had drunk a quart of the decoction of hops. This latter remedy I have used extensively in treating delirium tremens, and in some mild cases have succeeded in subduing it with this alone.

In the Smallpox Hospital there are but three patients, all doing well. The treatment pursued is fresh air, plenty of cold water, with occasionally a saline draught. One of these cases has appeared to me singular. At the time the man came here from the city, the pustules were filling up. About the eighth day they broke; scabs formed, came off, and after a few days the patient was discharged, but was gone but three days. Another eruption appeared, and he returned. Pustules filled, scabs formed a second time and came off, having precisely the same appearance as the first. This may be a common occurrence, but I have never read of, or seen such an one.

At the Nursery Hospital, Dr. J. Winterbotham is the Resident Physician. There are about 125 patients here, among whom the prevailing disease is ophthalmia. At times it has been exceedingly malignant and contagious, but at present it is less virulent and general than formerly. A new site has been procured, and buildings are in progress for the 1000 children in the Nurseries, on Randal's Island. A separate hospital for the ophthalmic cases is intended to be ready in the spring.

At the New Alms House, Dr. B. F. Wendel, another of the assistants,

is at present stationed. This is a branch of the Alms House at Bellevue. There are about 40 patients here, with promiscuous diseases.

At the Lunatic Asylum, Dr. M. H. Ranney is the Resident Physician. He has had charge for the last eight months, and is doing well. There are at present about 400 in the Asylum, 170 males and 230 females; three fourths of whom are foreign paupers. In the treatment of these lunatics very little medication is employed, reliance being placed chiefly on moral means. The principal amusements in which they are indulged are music, in which some are quite proficient, and dancing. In some institutions of the kind, it is customary to depend upon games to occupy and amuse the patients; but as most of these, here, have been of the working class, Dr. R. thinks it better to give them light work. All the clothing for the establishment is made by the inmates, and most of the out-door work is performed by them. About 150 attend church regularly, and are quiet and well behaved. Among the patients, there have been two or three interesting cases of nymphomania. They were treated successfully with counter-irritation and cooling applications. Medical treatment seems to be of little service in lunacy here.

Blackwell's Island, Oct. 28th, 1847.

GEO. H. KINGSBURY.

CASE OF OBSTINATE AND FATAL CONSTIPATION.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I take the liberty of sending you an account of a case, the most remarkable that has ever occurred in my practice; and if you deem it of any interest to your readers, you are at liberty to publish it in the Journal. The case is obstinate and fatal constipation, from insidious inflammation.

The patient was a married lady of our city, in middle life, and between four and five months advanced in pregnancy. I was called to the case some two or three days after she was taken down with symptoms of what she and her friends called colic—similar attacks of which she had had frequently before, and they commenced treating her with laudanum in the usual way, but without any effect.

When I saw her there was no tenderness over the epigastrium upon pressure, and no fever—she simply had violent pain over the region of colon and stomach, attended with considerable flatulence, which would entirely disappear for a while and then return again. In a word, the case seemed to be clearly one of *flatulent colic*. And as such, a solution of half a drachm of bi-carb. soda, with fifty drops of laudanum, was administered, to be followed with a full dose of oil, having the same amount of laudanum, provided the pain returned.

There was ease for two or three hours, when the pain returned, and the oil and laudanum were given, but rejected. Cal. and pul. Dov., ãã gr. x. were given, with some relief for a short time. This was followed by another dose of oil, which was again rejected. The pain returning and the stomach irritable, the following prescription was ordered :—R., S. mur.

hydrarg., gr. xij. ; pulv. opii, gr. ij. M. Ft. pil. iv. One to be taken every two hours, with laudanum, gtts. xl., between the pills, if they should prove insufficient to quiet pain. The pills and laudanum were all taken, with but partial relief. The stomach being somewhat irritable, a dose of magnesia, to be repeated, was ordered, to move the bowels. This was all rejected.

I now discovered, for the first time, and this was on the evening of the second day of my attendance, that there was some tenderness over the abdomen, on pressure—and some fever, though not very great. Thinking there might be some degree of inflammation present, and that it was not impossible for colic and inflammation to be combined, I determined to draw blood, and took about two ounces, and then had a large blister applied over the region of the stomach and bowels. She was left with an anodyne for the night.

Saw her next morning. No better. Had vomitings in the night, and the pain continuing all the time, though still returning at times with greater violence.

Being anxious that the bowels should be opened, all anodynes were stopped, and senna and salts were administered in repeated doses, four in number, without effect—two of which, however, were rejected.

Evening.—Stomach continues sick, and now rejects almost everything taken. There being some thirst, the free use of ice was allowed, and injections ordered. At bed-time visited her, and found the pain had increased on pressure over the region of the stomach and colon—that there was some restlessness, with a moderate degree of fever. Ordered 24 leeches to be applied upon the abdomen, and followed by poultices.

Next morning saw the patient early. Found her no better, but rather worse. Sick stomach through the night, with occasional vomiting. Pain all the time, but still greater at some moments than others. The bowels not moved yet. Ordered the warm bath and injections to be repeated while in the bath, and the following pills of ox-gall and hyoscyamus—five grains of former with two and a half of latter, and croton oil, two drops, made into four pills—to be given alternately every two hours till the bowels were moved.

Mid day saw patient. No better. Bowels not yet moved. Some of the medicine rejected.

Professor Monkur was now requested to see the case with me. At 4 o'clock, P. M., we met. The patient no better, and no operation yet.

The doctor advised calomel to be given in large doses. Three powders were ordered; the first of twenty, the second of fifteen, and the third of twenty grains; the first to be followed in two hours with half an ounce of ol. tereb. rubbed up in an emulsion—and so on through the night, till the bowels were moved.

Next morning both sent for to see the patient early. Found her much worse, though she retained the medicine, and took the whole prescribed; which amounted to forty-five grains of calomel and one ounce oil turpentine—which added to the twenty-two grains previously given,

made now sixty-seven grains of calomel in her system—and yet no motion of the bowels. As there was no time to lose, the doctor thought we might venture on five drops of croton oil at a dose, as he said he had given as high as seven drops with good effect. This was given, injections of turpentine ordered, and the patient visited again at 10 o'clock. Found the medicine had been retained, but bowels not moved. She was now evidently sinking fast. There was great restlessness, tossing from side to side of the bed; pain not so great, but still complains very much. Ordered mercurial unguent to be rubbed freely over the abdomen, inner side of the thighs, and arm-pits—and directed a dose of oil.

6 o'clock, P. M.—Met, and found there was still no operation, and that the patient was evidently *in articulo mortis*. She died about three hours after.

Post-mortem Examination, 10 o'clock next morning.—Abdomen considerably distended. Colon greatly enlarged by wind, fluid injections, and some feculent matter. No hardened feces discovered. Next to its size, the most prominent alteration was the high grade of inflammation seen throughout its whole course, and most especially on its left ascending portion, commencing at the caput coli. Here the redness was intense, with incipient patches of mortification at different points. The small intestines showed a considerable amount of redness in different parts of their course, but not in so high a degree as the colon. The colon, in fact, showed that it was the great focus of all the distress, and the cause of death. No hardened and impacted feces, no intussusception, no strangulation, could be discovered—the inflammation alone seeming to be the cause of all the torpor and want of contractile power shown by the bowels. The distention of the colon by wind or gas may, probably, have had some share in this general paralysis of its muscular apparatus. The stomach was slightly inflamed—also the peritoneum. Liver and spleen looked healthy. Uterus somewhat inflamed—and the right Fallopian tube, with its fimbriated extremity, greatly engorged with venous blood.

Remarks.—It seems evident, at least to our mind, that in the above case there must have been inflammation of the colon from the very beginning, and that its true character was masked by the symptoms of colic, which were associated with it, and predominant at the outset. And this teaches us the important fact, that not only these two diseases can come together, but that an insidious, highly dangerous and fatal inflammation may also be going on at the same time in the system, unsuspected, till the Rubicon has been passed, the citadel of life stormed, and medical skill consequently put at defiance. Most respectfully,

W. R. HANDY.

Baltimore, Md., Oct. 28, 1847.

NOTES FOR A MEMOIR ON THE PATHOLOGY OF THE TEETH.—NO. II

By A. C. Castle, M.D., Surgeon Dentist, N. York.

[Communicated for the Boston Medical and Surgical Journal.]

THE teeth, in the classification which I have adopted, are severally affected after their order in the following manner. The dense yellow teeth present a firm, strong and permanent appearance, from their original constitutional healthy secretion and deposition—the complete combination of the several constituents—their perfect ossification and dense solidification—and the thick cortical protection of well deposited and perfect crystallized enamel. These teeth rarely, if they ever do, decay from any disease of their substance. When they are affected, the cause is produced by the slow chemical assaults of vitiated, acrid, and acidified matter, arising from decomposition of substances taken into the stomach, which by chemical combinations with the lime, gradually denudes the bone of the teeth of its protecting covering of enamel, and, as a tree deprived of its bark, so the body of the tooth, irrespective of any internal action, rots from the action of the atmosphere and other external agents. Occasionally, an internal vital principle will be brought into action for the prevention of the progress, or rather as a resistance to the process of decay; and while this vital principle is too weak to throw off, or free the healthy from the diseased portion of the bone, by the process of exfoliation as in other bones of the system, a spontaneous cure may be seen, by a beautiful resource in the secretion and deposition, from the vital tissues of the teeth, of a new material into the exposed pores or capillary tubes of the bones. This transparent, amber-like deposition gives to the decayed surface, where it is clear, the peculiar appearance of amber; and where discoloration has taken place, the exposed surface appears as if it had been charred and afterwards polished.

The next affection of this class of teeth, is caries, from natural defects in the formation of the teeth, especially in the depressions and fissures of the enamel, upon the masticating surfaces of the molar and bicuspid teeth—which may be accounted for by the fact that crystallization, preferring the sides and sloping surfaces of substances for its formations, the striæ of the enamel form fissures in the centre of the depressions of a tooth, and which may be illustrated by the centre dependent angle of the letter M, which resembles the section of these teeth. The enamel, then, not being in close apposition in the internal centre of this angle—the bone is not thoroughly protected, whilst the fissures form receptacles for the insidious action of any acrid matter, vitiated secretion or gastric acids. The most destructive of all the agents which thus act upon the substance of the enamel and body of the teeth, I consider to be an *oxalic acid*, generated in the stomach by decompositions of aliment and the atmospheric agents swallowed with the food and saliva, which, of course, forms new chemical combinations. It has of all other acids the greatest affinity for lime, and forms one species of the calculi deposited by the urinary organs. The next most destructive agent upon

the substance of the teeth is the generated *carbonic acid*. Both of these acids are the attendants upon debilitated digestive organs, and never-failing friends to indigestion and its symptomatic and sympathetic *cephalia gastrica*. In children, I believe these acids to be formed to a very great extent, and hence the invariable destruction of the weakly-constituted deciduous teeth, and the caries and decay of the permanent teeth. I would here incidentally remark, that in cases of caries, either superficial or circumscribed, or deep-seated, as it often is, occurring in the unprotected clefts or fissures, "plugging" or stopping them with any incorruptible substance will at once arrest its progress, and remedy these little omissions of nature.

The next affection of these teeth, generally occurs at the more advanced periods of life, and it has puzzled the profession not a little, as well as many able writers, to account for this vexatious and painful disease. An eminent gentleman has recently published an elaborate work in advance, being dated 1848, in which he speaks of this affection, and frankly shows that he cannot assign for it any other causes than those advanced by his predecessors. So far as my experience extends, I have found it to arise from the action of pure gastric acid—which in numerous instances is not sufficiently evolved to affect the digestive apparatus or its powers, yet is of sufficient influence, when mixed with the saliva, to act upon the necks of the teeth, sometimes implicating the processes of the alveoli, too often facilitated by the irritating effects of the tooth-pick. It ultimately becomes a more painful disorder, almost partaking of neuralgic intensity. Hollow grooves, as if the teeth had been cut into by a file, or worn by the friction of a running cord, make their way deep into their substance, until the teeth break off, leaving smooth and in many cases useful stumps, which, until now, would hardly bear the touch of a hair. Often in combination with this affection, or as often alone, is the wearing down of the crowns of the teeth—the chemical action being materially assisted by the mechanical function of triturating the food—the friction, as will at once be perceived, being materially increased by the action of the gastric acid upon the manducating surface. And here, again, may be seen the internal vital principle of the teeth, in beautiful exemplification of the internal resources and restorative powers of properly organized teeth, to arrest the entire loss of their substance to the animal economy. As the nerve, artery, vein and membranes of the internal tooth, are compelled to recede, *pari passu*, with the wearing down of the crowns upon them, so when decay meets with a spontaneous cure, the internal vital membranes secrete and precipitate into the pores and capillary tubes of the body of the tooth, and upon the exposed surface, the same amber-like deposition, which, so far as my observation extends, seems to be as impermeable as it is indestructible, and serves to preserve their integrity to any indefinite period of existence. When the wearing away or wasting of the teeth from this cause—"denudation," as it has been termed—is rapid, they are exceedingly painful to the touch, even soft food causing intense pain; and in partaking of any acidified vegetable preserves, or sub-acid

fruits, a thrill of pain pervades the jaws and whole system, as if every nerve had received a shock. Sometimes this will also occur with sweet-meats. Thus, until the nerves, vessels and membranes shall have sufficiently receded, is this painful process continued. After this interesting effort is completed, the teeth are insensible to the touch, and are often worn down smooth with the gums. The whole process is beautifully illustrated in the teeth of the gaminivorous animals.

After the obliteration of the vital organs, these fangs of teeth, thus preserved to the animal economy, assume an entirely different character. They no longer receive nourishment; on the contrary, the absorbents of the gums and their periosteum absorb, first, the greater portion of earthy matter from the teeth, or rather they remains; and, secondly, the animal matter, leaving behind in shape a diminished fang of a greenish amber-like transparency, and like amber presenting the same characteristic brittleness.

After these teeth wear away in this manner, either separately, or as a whole, forming concave or longitudinal hollows in each tooth, until the teeth meet closely together and cease to come in contact with their antagonists, the gastric acid continues its innovations upon the substance of the teeth, the edges of the enamel crumbling and breaking away—frequently to such an extent, that only one or two antagonistic teeth will meet. Sometimes an irregular, rough, serrated concavity, but more frequently a smooth surface, forming an elliptical open space, is to be observed—of course placing these intermediate teeth, as it were, *hors de combat*. It does occur that this destructive process extends in this concave order, that such an open space is left between the antagonistic teeth as to destroy perfect enunciation, and permits with difficulty the retention of the saliva within its natural bounds. The various modes of treatment for the cure and prevention of these derangements will follow in their respective places.

MEDICAL ETHICS FOR PRACTITIONERS, AND FOR COLLEGES; OR "WHAT MAKES THE DIFFERENCE?"—NO. III.

[Communicated for the Boston Med. and Surg. Journal.]

Thus following in the beaten track of the worn-out institutions of Europe, and apparently endeavoring to mould our republican notions and habits so as to square with systems constructed for the purpose, and practically operating to trammel the unaided energies of genius, and giving pre-eminence to ancestral name; the committee have retained in their report on medical ethics some such notions of what constitutes professional dignity as must, if followed, retard the progress of the young aspirant to the honors and emoluments of the profession, by preventing his taking, what in all other employments has been shown to be a legitimate means of communicating with the public. They have been at the same time extremely careful to express no disapprobation of the course almost universally pursued by medical colleges, of public

announcement or advertisement, of issuing their private cards, of publicly offering advice and medicine to the poor gratis—of publishing cases and operations in the daily prints, or suffering such publications to be made—boasting (if not of cures and remedies) of the superior advantages of their institutions on account of locality, or the distinguished acquirements of their professors; adducing certificates of their skill as teachers, &c.—all of which we have been gravely told “are highly reprehensible in a regular physician,” and that such are the “usual practices of empirics.”

But though the writer can discover nothing derogatory to the most exalted dignity of character in a modest and unassuming public advertisement, or private card, yet boasting, whether by a regular practitioner, or a junta of college professors, can rarely be compatible with real excellence or true elevation of sentiment. He would, however, be extremely unwilling to accuse our medical institutions of any act violating a rational code of ethics, unless abundant evidence of such facts existed.

It is said that the practitioner shall not “publicly offer advice and medicine to the poor gratis”; and yet my eye now rests upon the circular of one of our institutions which says, “Among the operations performed the past year in presence of the class, are,” &c. (here follows a list of a number of operations). “Operations and prescriptions are gratuitous to indigent patients.” Another announces that “All surgical operations will be performed gratuitously upon the poor of the city and vicinity during the term, provided the class be allowed to witness them.” And again, another says, “To extend the usefulness and promote the benefit of the attending students, the professor of anatomy and surgery has gratuitously offered his aid to the necessitous poor who apply for relief.” But it is unnecessary to multiply examples under this head; these announcements and offers present no new idea to the public, as physicians have always been in the habit of giving advice, and if in the country of dispensing medicine and operating upon the poor gratis; and not only this, but of turning out from their comfortable firesides and buffeting storms and darkness, and the blasts of winter, to carry, with Samaritan goodness of heart, the healing balm and the anchor of hope to the child of want—the suffering victim of disease—without any expectation of reward, beyond the consciousness of having given “aid and comfort” to one bearing God’s image, and in distress. The public knows this without advertisement. Yet there can be no harm in informing them what particular hours can be most conveniently devoted to this service of philanthropy; but if paraded in public prints for ostentatious purposes, in order to advance the interests of the practitioner or the college, it constitutes a mere gull-trap, intended to catch larks, and as such is equally unworthy of either and of an honorable profession.

Equally inattentive have some colleges been to the very proper restriction with regard to the publication of cases and operations in the daily prints, or suffering such publications to be made, with all the circumstantiality of an official document. This practice, it is hoped, has not yet been entered upon by many of our institutions, as such a course,

if pursued by them, must appear to an unprejudiced mind of elevated sentiment, as on a par, in point of dignity of character, with the Lock Hospital reports, with which the same papers are too frequently polluted. On reading these clinical reports, associated with articles of political slang, quack advertisements, &c., who but feels the rising inquiry whether it has in reality become necessary to descend so low for the purpose of advancing science. True it is necessary for the physician to enter the charnel house of corruption in order to investigate disease and decay, and his eye must see, and his ear must listen to, suffering and its mournful complaints. But can it be necessary that these loathsome details, instead of remaining locked up in the bosom of the profession, to which, for the hope of relief, they have in confidence been committed, should be communicated through the agency of a news print to the public? The nostrum monger and charlatan, it is well known, depend much upon such an array of cases and cures in public advertisement, accompanied with pictures of disease in order to excite the wonder of gaping credulity, at the success of their remedies: but real science needs no such adventitious aids—such pressing necessity of “blowing its own horn.” It is hoped that such colleges as may have, without sufficient consideration, given countenance to a practice which the committee have so decidedly denounced, will pause in their downward course, recollecting that though

“Facilis descensus Avernî,”

“Sed revocare gradum superasque videre auras,
Hoc opus, hic labor est.”

Another, and to the real lover of his profession, not less painful subject of remark, is the inflated boastings of the numerous college circulars, and the equally effectual, though less direct effort of the introductory lectures, which annually and semi-annually flood the land. The committee inform us that “it is derogatory to the dignity of the profession to boast of cures and remedies;” i. e., for the practitioner to claim the attribute of superior qualifications for the performance of those duties of his calling, over and above that of his brethren. And who, it may be asked, is not disgusted with the vain boastings of such as regard not this rule of our able code—and does not say amen to the sentiment that condemns them, whether it hit a graduate from a college, endeavoring to hide his face behind his parchment, or the more excusable charlatan, who enters upon a system of imposture without, perhaps, sufficient intelligence to appreciate the enormity of the evil he is committing. But while the practitioner should not boast of superior skill, nor infallible remedies, the colleges should exhibit a suitable delicacy in claiming to possess distinguished advantages—of possessing a better locality—of having secured more able and better qualified teachers—more extensive museums of rare pathological and anatomical specimens—a more extended field for clinical instruction, &c., all of which are identical with the practitioner’s boasting of cures and remedies.

A few extracts from the numerous annual and semi-annual medical circulars with which the country is periodically flooded, will illustrate

the system of boasting adopted by many of our institutions, and also show how far they are identical in spirit with the "ordinary practices of empirics." Take the following. "The officers of ——— Medical College, in sending forth their annual announcement for the lectures for the ensuing session, do it with feelings of peculiar gratification. The prosperity of their institution has continued to increase; the number of students in attendance on their lectures, during the last session, was not exceeded by that of any other medical school in the United States. This will appear from the catalogue of students and graduates herewith published. It appears from their records that the number of students during the session of ——— was," &c. &c. Again, these modest and unassuming officers inform us that "they have created a new professorship in their institution," and after announcing the name of the individual selected to fill this chair, they thus continue:—"In announcing to the profession the appointment of this *distinguished* gentleman to a professorship in ——— Medical College, the officers of that institution do so with unmixed gratification. The reputation of Professor ——— is too well known to require any comment. As a scholar, a profound physician," &c. &c. Such is the language of one of our institutions, which yet claims to stand among the first in the land.

It may not be improper to descend somewhat from our metropolitan cities, and see how the less numerously-attended schools of the country speak. "The Faculty feel bound to present some further considerations, which, as they have been well expressed in the concluding paragraphs of the introductory of last session, * * * are quoted in this place. 'Remote as we are from the ten thousand snares and dangers attendant upon college life in large and populous cities, and aloof from the multiplied sources of excitement and agitation inseparable from a city residence, our location in a retired spot would seem to offer peculiar facilities for reflection and study; where, as in the academic groves of the ancient Lyceum, we may cultivate the pursuits of philosophy without annoyance or interruption from without. And while I would make no comparison which would be deemed invidious [oh no! of course not], I may claim for this College a healthy location in the midst of a virtuous population,'" &c. &c. Then we are informed that none of the temptations of the cities beset young men if they happen to be out late without the knowledge of their careful mothers, and that the entire population have banished from among them for miles around the traffic in intoxicating liquors. The professor then throws down the glove. "When our proudly-eminant rivals in the city are able to make a similar announcement, we shall no longer make an exclusive claim to this pre-eminence."

With this example of the string upon which our country institutions pull, *par eminence*, without noticing the habit of boasting of the great opportunities of their respective professors, in which they about equal their city *confrères*, let us now see what course is pursued by one of those which belong to a class separate from either, and combining, as they say, the advantages of the two, without the evils or inconveniences

of either the city or the country. And first, with regard to the great attainments of their professors. An old lecturer has for some reason or another resigned, and the Trustees have been so very fortunate as to obtain another, and they thus announce the extraordinary circumstance: "They have fortunately secured for this professorship the services of Dr. _____, of _____, a gentleman whose opportunities, both at home and abroad, and whose experience as a teacher, have already given him a high reputation. His residence in Paris under the instruction of such men as Capuron, Velpeau and Maygrier, with the advantages of the Parisian hospital, the Maternité, * * * his extensive collection of plates, specimens, casts, instruments, &c., which are said to be unrivalled in this country, are to be placed permanently in the museum of the College." In a recent announcement this same school speaks thus: "In the course of the session students will have opportunities to witness a variety of surgical cases. In regard to such opportunities, it is believed that no school in the United States can present superior advantages. The list of cases brought before the class, and of operations performed, will show how amply this branch of instruction is provided for. Hereafter no person will be admitted to the clinical lectures, except matriculated students and physicians"—a statement that shows that laymen were heretofore in the habit of attending such exhibitions, and that the Trustees have been awakened to a sense of its derogation of professional dignity by the suggestions of the code under observation. They also append a list of all the cases and operations presented at their clinics, from the itch upwards, with uncommon minuteness, numbering two hundred and sixty-eight cases, all told.

PARACELSUS.

October 22, 1847.

ON THE TREATMENT OF THE INSANE.

[Communicated for the Boston Medical and Surgical Journal.]

To Dr. L. V. Bell, Superintendent of the McLean Asylum for the Insane.

DEAR SIR,—It has afforded me much gratification, as it has doubtless yourself and other benevolent persons, to hear of the establishment of a Professorship of Insanity at the Medical School at Columbus, Ohio. It should be hailed by every friend of suffering humanity as a new and eventful era in the history of that disease, and as an omen of another step towards perfection; and a hope should be cherished that another cloud of darkness is about to be removed from the minds of the community. We have been stationary long enough. It is unaccountable, and certainly unpardonable, that the study of a class of diseases so numerous and important, in a professional as well as benevolent point of view, should be so much and so long neglected by the great body of physicians. The causes, nature and treatment of the disease are almost wholly unattended to by the general practitioner. To ascertain that a patient is more or less deranged, and to send the unfortunate sufferers indiscriminately to an overgrown insane asylum, seems now-a-days to be

the extent of his duty. He does not stop to inquire if some other more suitable place could be resorted to for rest and retirement from the exciting causes of the disease, or perhaps delays too long this only proper mode of treatment. By some, no other treatment than separation from home, connections, and a living death in a mad-house, is entertained, and to doubt the infallibility of such institutions is almost sacrilege. The treatment and opinion of one individual is henceforth to be implicitly relied upon.

It cannot be denied that too much confidence is placed by the community in the present imperfect overgrown system, and that it appears to think that all improvement and progress is at an end. I do not mean to have the inference drawn that the superintendents and directors of these institutions are not sacredly devoted to the high and christian duty of alleviating the miseries of their unhappy and afflicted brethren. Far be such intentions from my heart. If love, kindness, patience, and many other christian virtues, are not here displayed, I know not where to look for them. I would only ask, are they not so wedded to old ideas and theories, as not to see their errors and imperfections? Are not these institutions too large and unwieldy? Are not the necessary rules and regulations of institutions of such magnitude, too clogging to the wheels of improvement, and a hindrance to progress towards truth? Has not the change from the lonely, dark and filthy cell, to the beautiful, stately edifice, where every attention to the physical wants is bestowed, been so obvious as to almost deaden our senses and cause us to shut our eyes to further progress? Is not too much attention given to the outward, and too little to the inward man? Does not the immortal require food as well as the mortal? Do not the endless varieties of mental diseases require as many different modes of treatment? Is it not possible that the most skilful, the most intelligent and experienced, may be mistaken in the treatment of each individual case? Is it reasonable to conclude that one or two physicians, however learned, can so study and investigate every case among two hundred, as to faithfully discharge their duty to society and to God? Are not the duties and responsibilities of the superintendent too numerous and diversified? Is one hour a day sufficient to calm the raving, encourage the desponding and teach the idiot? Ought the principal part of these arduous duties to fall upon ignorant, though kind, attendants, whose motives are too often merely mercenary? Can the diseased mind be more easily and quickly understood, and trained, and educated, than the sound? Should man's mind, thus unlinged, be subjected to laws and regulations as unalterable as those of the Medes and Persians, or those that govern a machine, and these laws enforced by inexperienced attendants? Ought the timid, nervous and desponding, constituting, perhaps, one third of the insane, be subjected to a like treatment? Ought these and the raving maniac, and disgusting, drivelling idiots, to be in the same building or apartments? Ought not the incurable patients to be wholly separated from the curable, in separate institutions?

Is it not heart-rending enough for the sensitive female or man to be

torn from home and all its tender ties and relations, without being subjected to the vulgar, sickening gaze of the curious visitor? Why should the stranger intrude his presence in a public institution for the sick, more than in the private dwelling?

Would not a board of intelligent, well-educated physicians be more competent than one selected entirely from the most opulent and benevolent? At any rate, ought there not to be at least a moiety of physicians? Would not such be more capable of judging of the sanity of patients, and the proper treatment? Ought the opinion of one person to be relied upon as to the sanity of a patient? Have we not very recently had a case, in which such able and experienced men as yourself and Dr. Woodward differed on the question of the sanity of an individual? When we reflect that a thousand patients may come under the care of one superintendent during a year, how great is the responsibility? How important is it, then, that physicians should be better educated than at present, and that more attention should be paid to this subject, and a course of lectures be given at all our medical schools.

I am entering, at present, more largely upon the subject than I had intended. It was only my design to call your attention, and that of other benevolent men of our age, who are interested in the welfare of mankind and the management of our schools, to this interesting subject. I know of no one more competent than yourself to deliver a course of lectures this winter, and certainly no one is more willing to sacrifice his time in the cause of suffering humanity.

I have taken the liberty to address you personally on the subject, because you are deservedly at the head of an institution which is ranked the first in the country; because I know that you are ever ready to listen to truth, and would be the first to correct errors when convinced that any exist; because your influence for good would be immense if exerted at the present time, when every State in the Union, not already having hospitals for the insane, is about to erect them; and, lastly, because I wish thus publicly to acknowledge my sincere and heartfelt gratitude to you for your constant and unwearied brotherly care and interest bestowed upon the writer of this communication, when in deep and almost hopeless despondency. To your unwavering and steadfast kindness and attentions he owes his life and a perfect restoration to happiness and health.

Yours truly,

A. B. WHEELER.

ETHERIZATION IN DENTISTRY.

To the Editor of the Boston Medical and Surgical Journal.

MY DEAR SIR,—It is but the dictate of benevolence to point others to a source from whence we ourselves have derived relief. Influenced by this feeling, I would beg a little space in your Journal, for a brief account of the mode in which I have obtained relief from a distressing but not very uncommon situation. For a few years past, I have been much troubled from the loss of several of my upper teeth, and decay of

my molars, caused by injudicious operations. Finding my voice materially affected in its tones by this misfortune, it was suggested to me, as the only alternative, that I should have the remaining teeth, seven in number, removed, and a set for the upper jaw prepared. I confess I felt not only very reluctant to part with my old friends, but chiefly a dread of the pain of extraction, and the inconvenience of being without my upper masticators for weeks, led me to put off the evil day, in the hope that some other mode of relief might be obtained. This hope was in vain; and finally I resolved to meet the operation at once, and overcome the anguish it must inevitably bring with it, by making use of the agency of the vapor of ether.

The ether was administered by means of a sponge, the lower part of which was concave to prevent its coming in contact with the lips. Notwithstanding the mass of testimony in favor of this subtle fluid, when skilfully used, I had myself little confidence in its application to my case. When interrogated by the doctor, from time to time, while partially under its influence, my doubts were even stronger, whether it would be at all available for me. After the sponge was removed, I was requested to open my mouth, which I did with some hesitation, imagining that the ether had failed in its effects, and that I must endure what had always been to me a dreaded remedy for the tooth-ache itself. Judge, then, of my surprise, when I found one and another of my teeth coming out, counting myself, as the instrument was applied, until the seven were extracted. The effects of the ether passed away immediately, and nothing painful or unpleasant was experienced. I have since witnessed several severe operations performed by Dr. Hitchcock; one for a brother clergyman, whose case was attended with considerable difficulty from the peculiar condition of his teeth, and whose experience of the alleviating effects of the ether corresponds with my own.

What I consider, dear doctor, the most pleasant part of the whole matter, was in being supplied, on the fourth day after this severe laceration of my jaw, with a set of teeth of Dr. H.'s own manufacture, which in regard to color, adjustment to the mouth, and adaptation to the purposes for which teeth are designed, meet my wants so satisfactorily, that at times I am scarcely conscious they were not placed there by nature. It is due to Dr. Hitchcock's skill to add, that on Sunday following the operation, I was able to perform all the duties of my church (and you are aware they are quite trying to the voice), without any inconvenience or embarrassment, and that I find my articulation and the tone of my voice much improved.

Truly your friend and ob't serv't.

Boston, Nov. 3, 1847.

M.

[The foregoing communication is from a well-known Episcopalian clergyman of this city, and may be relied upon as an exact statement. —Ed.]

 THE BOSTON MEDICAL AND SURGICAL JOURNAL.

 BOSTON, NOVEMBER 3, 1847.

Medical Persecution.—There are men in every community who labor under the extraordinary hallucination, that they confer immense benefit on society by acts which, to every one but themselves, are plainly those of contemptible meanness. It seems that a New York Alderman had a motive in publicly accusing Dr. Reese, the able and accomplished Physician of the Bellevue Hospital, of pocketing an unlawful fee by the sale of dead bodies from the institution. This abominable charge was repelled with becoming spirit by Dr. Reese, who at once courted an investigation into his official doings. "A special committee, to whom was referred the preamble and resolution of Alderman Purser, presented to the Board of Aldermen on the 6th of September, in relation to the sale or disposal of dead bodies from Bellevue," respectfully reported:—

"That they have given diligent attention to the subject referred to them, and after full investigation, occupying several entire sessions of the committee in the examination of the witnesses produced by Alderman Purser, they unanimously concur in the opinion that the charges set forth in the accusation against Dr. Reese, Resident Physician at the Bellevue Hospital and Alms House, are entirely unfounded. So far from sustaining either of the allegations, all of them were distinctly disproved by the witnesses produced by the accuser, so that no case having been made out against Dr. Reese, no defence on his part has been called for.

"It is due to Dr. Reese to say, that he has throughout manifested a wish for the fullest investigation; and has satisfied your committee, by the cross examination of his accuser's own witnesses, that there is no truth in either of the accusations made against him."

"Under such circumstances, it does appear to your committee that ample reparation is due to the injured party, by the publication of the following resolutions, which they respectfully submit, with that view, for adoption by the Board, viz. :—

"1st. *Resolved*, That the charges made by Alderman Purser in this Board against Dr. Reese, Resident Physician at Bellevue, on the 6th of September last, 'relative to the sale and disposal of dead bodies at Bellevue,' have not been sustained by any semblance of proof.

"2d. *Resolved*, That the present Resident Physician at Bellevue has the undiminished confidence of this Board in his capacity and fidelity as a public officer, and the public may be assured that, during his administration, no corpse has been taken from the Hospital, except for interment.

"3d. *Resolved*, That these resolutions be published in the official reports of the proceedings of the Board, in justice to Dr. Reese, who has been wrongfully accused in the premises."

Bad Practice.—When noticing the story in the newspapers, a few weeks since, that a medical gentleman of a neighboring city actually tore

off the dressings which he had been applying to a wound, because he had ascertained that no fee would be paid for the service, it seemed impossible that it should be true; yet it appears that a practitioner who has held a high position in the estimation of his medical brethren, did actually do what has been asserted. The *Vox Populi*, a paper published at Lowell, Mass., with a boldness which we shall at present refrain from exhibiting, even in regard to such a very reprehensible kind of action, calls a surgeon unreservedly out by name, as the perpetrator of the act. Now if this declaration is a libel on the fair fame of the person indicated, he will at once seek redress through the law; but if he sorrows over a hasty act, thoughtlessly committed, without an evil intention, he has unquestionably arrived at our own conclusion, that it was *bad practice*, and can only be atoned for by an increased devotion to the demands of the sick, unfortunate poor, on all future occasions.

Cure of common Reducible Inguinal Hernia.—A gold medal was lately awarded to Henry Bryant, M.D., of Boston, for the best dissertation on the question, "Is there any safe and certain operation for accomplishing a cure of common reducible inguinal hernia?" This was the Boylston Prize Question, and we feel persuaded that the author was fully entitled to it, from the fact that the committee is composed of gentlemen of eminence, who watch closely the honor of the profession, of which they are conspicuous members. Not having seen anything further, a curiosity is naturally enough manifested, to know Dr. Bryant's views, and by what process he proposes to accomplish the certain cure of inguinal rupture. If the dissertation were published, either in a pamphlet, or in some of the Journals—ours being hereby tendered for the purpose—it would be received by the profession, we doubt not, with much pleasure. For two hundred years this same subject has occupied a prominent place in every published treatise on operative surgery, and there are scores of surgeons who have settled down with the idea that nothing worth noticing has been added to the old stock of information, at least for a considerable time. The puncturing practice is gaining upon the public, because cures are effected; but if there is any other mode of bringing about the same result, it should be known to the world of hernial invalids.

Philosophy of Health.—A manuscript treatise on "The Philosophy of Health, or Health without Medicine," by L. B. Coles, M.D., of Boston, has been some days in our desk, for examination, and may possibly assume a more tangible form under the auspices of a publisher. Without passing a direct judgment on the character of the proposed work, it may be gratifying to the reader to have a catalogue of the subjects on which he has written for popular reading. First, digestive organs; embracing the mouth, stomach, liver and bowels. Digestive process, as mastication, chylification and evacuation. Dietetic rules, for eating, digestion, exercise and labor. Food and drinks, as vegetable and animal food, stimulating and nourishing drinks. Particular directions, to parents and guardians, to literary institutions, to professional men—and on indulgences. Mental affections, as cheerfulness, melancholy, benevolence and malevolence. Obligations and laws, namely, physical, moral, personal and social.

It would hardly be allowable to criticize an unpublished book; but it is quite certain the author is willing that any one should do so, if in a spirit of kindness, with a view of suggesting improvements. Dr. Coles appears not to have attempted a decidedly original work; on the contrary, he has gleaned the best part of every author's philosophy, who has any, on all the leading topics discussed. He may be thought a little inclined to radicalism in the matter of abstaining from animal food, yet that is a kind of physiological sin which may be winked at in this age of philosophical revolutions, when current doctrines are overturned with the rapidity of South American pronunciamientos. If one keeps to the beaten track of the crowd that has gone before him, and never presumes to do an original act, those who come after look back upon him as a very respectable person; but a wide departure—a movement that excites notice on account of its deviation from prescribed rules, rouses up the father confessors of the medical ranks as though a meteor had flashed before their mental vision.

Swedenborg on Generation and the Human Mind.—A London correspondent of the New Jerusalem Magazine, under date of October 2d, announces that Dr. Svedbone had recently returned from Stockholm, with intelligence that the Royal Academy of Sweden would lend three more of Swedenborg's Scientific Tracts; viz., the continuation of the Animal Kingdom, the Treatise on Generation, and another on the Human Mind. The unpublished manuscripts of that extraordinary man, Emanuel Swedenborg, still appear to be both numerous and important, notwithstanding the mass of volumes which have passed through the fingers of the printers. Each succeeding book opens a new train of thought, and exhibits more and more his vast and profound attainments in science. He was not only learned in all the wisdom of the age in which he lived, but he certainly anticipated some of the more modern discoveries; and yet there are literary and scientific treasures of his yet to be opened.

Spratt's Illustrations of Midwifery.—Messrs. Wagner & McGuigan, of Philadelphia, it is understood have brought out an elegant edition of Spratt's Illustrations; but as there appears to be no copies in circulation this way, it is presumed that the work is either unknown to some extent, or has not been placed before the profession in a manner to engage the attention of practitioners. Much ingenuity is exhibited in the construction of the plates—one part folding back to expose the appearance of regions below, after the manner of a dissection of the gravid uterus. The coloring, too, from the mere glimpse we had of a copy in the hands of a traveling agent, struck us as being excellent. Should an opportunity permit, it would be gratifying to point out the exact advantages this beautifully-finished book possesses over other treatises on the same subject.

Philadelphia College of Medicine.—A printed report, from this new institution, gives a very satisfactory view of its condition and prospects. Accompanying the document is the Faculty's announcement of the coming lecture term, with all such particulars as are essential to be known by students, who are strangers. Practical anatomy may be studied under peculiar advantages. We personally examined the dissecting rooms, recently,

and were much gratified with the facilities for acquiring a knowledge of that most important of all branches—human anatomy; and we have no doubt in regard to the efforts in each department, for imparting thorough instruction.

Opening of the Medical Lecture Season in Boston.—On Wednesday last, the students came together for the first time the present lecture term. From the number already in town, it is evident that the class is destined to be unusually large. The introductory discourse, by the newly-appointed professor of anatomy, Dr. Holmes, was of the most brilliant character. As it will probably be published, further comments are necessarily reserved for a future occasion.

University of Pennsylvania.—The course of lectures in this institution commenced, according to announcement, on the 18th of October, and, we are happy to state, under the most favorable auspices. The class in attendance was unusually large, and there is every indication that the extension of the term of instruction gives satisfaction to the industrious and ambitious students, those who are willing to earn the honors which they desire to obtain.—*Medical News and Library.*

Professor Agassiz.—We are credibly informed that this distinguished naturalist has consented to accept an invitation to remain in this country in connection with the scientific corps of Harvard College. Every scientific man in America will be rejoiced to hear so unexpected a piece of good news.—*American Journal of Science and Arts.*

St. Louis University.—We understand that Dr. Knapp, who was so recently appointed to the chair of *Materia Medica*, in this institution, has been ejected by the Trustees of the school, for certain immoral conduct in LaPorte, Ia., which has been set forth in a circular by the Indiana Medical College; and that Dr. T. Reyburn, of St. Louis, has been appointed in his stead.—*Missouri Med. and Surg. Jour.*

TO CORRESPONDENTS.—Dr. Sutton's report of Cases of Retained Placenta will be inserted in an early number.

MARRIED.—Daniel L. Gibbens, Jr., M.D., to Miss E. P. Webb.—At Bethel, Conn., Dr. Wm. F. Lacy to Miss J. A. Hoyt.—S. Edward Smith, M.D., of West Cornwall, Conn., to Miss M. T. Babcock.—In Boston, Dr. J. L. Martin to Miss L. D. Metcalf.

DIED.—At Honolulu, Dr. Richard Ford, an English physician, 72.—At Hartford, Conn., Silas Fuller, M.D., 73.

Report of Deaths in Boston—for the week ending Nov. 6th, 69.—Males, 33—females, 36.—Stillborn, 3. Of consumption, 17—typhus fever, 11—disease of the bowels, 9—dysentery, 3—slow fever, 1—worms, 1—dropsy on the brain, 2—infantile, 8—erysipelas, 1—accidental, 1—croup, 2—pleurisy, 3—lung fever, 1—drowned, 1—convulsions, 1—disease of the heart, 1—cancer, 1—abscess, 1—scarlet fever, 1—marasmus, 1—teething, 1—unknown, 1.

Under 5 years, 25—between 5 and 20 years, 9—between 20 and 40 years, 17—between 40 and 60 years, 16—over 60 years, 2.

The New York Medical Colleges.—The business of the "Old School" has commenced in right earnest. On Monday evening, 18th inst., Prof. Torrey delivered the Introductory before a numerous audience, and, in an able and scientific discourse, briefly reviewed the present state of the science of which he is so distinguished an ornament, and pointed out its principal relations to medical science. The class, we learn, is already large, and promises to equal that of any preceding year. We look with interest, but not with anxiety, to the result of the experiment which this school has made of increasing the term of study, in obedience to the recommendation of the National Medical Convention; for we cannot doubt that, in so doing, she will be amply sustained and abundantly rewarded by the patronage of the profession, both at home and abroad.

On Monday evening last, we had the pleasure of hearing Dr. Mot's feeling, and, we doubt not, very sincere tribute to the memory of his late lamented colleague, Professor John Revere. The address was throughout elegant, and in parts eloquent, interspersed with many sage reflections, and was delivered with a just and pleasing emphasis. The large hall was well filled, and gave promise of an ample harvest to the Faculty. At the close of his address, Dr. M., in brief but appropriate terms, introduced Dr. Dickson, the successor of Dr. Revere, to the class, and commended him to their good will and acceptance.

Last evening (27th), this gentleman made his first and anxiously-expected appearance before the profession in New York; and any expectations which might have been formed of his eloquence and ability, from the reputation which had preceded him, were not, we venture to assert, disappointed. The large room was *literally* filled; the *accueil* gratifying, and the approbation enthusiastic. Dr. D. could not but have been highly pleased with his reception. In his lecture, he enunciated his medical creed, and ably sketched the leading features of the plan which he should pursue in fulfilment of the duty committed to his charge. Against neither can we find aught to object.—*Annalist*.

Births and Deaths in London.—According to the statistical tables furnished by the Registrar-General, the amount of mortality in London has been, for some weeks past, much above the average. The weekly average number of deaths in the summer, calculated from five summers, and corrected for increase of population, is 940; whilst the number of deaths, in the week ending August 14th, was 1108; in that ending August 21st, 1057; and, passing to that ending Sept. 4th, 1051. This includes deaths from violence, which were, in the several weeks named, respectively 28, 10, and 35. Of the causes producing the mortality, we find diarrhœa causing 158 deaths in the first week named, 138 in the second, and 108 in the third; small-pox, 26, 24, and 25, respectively; phthisis, 120, 102, and 124; and typhus fever, 70, 62, and 77. Of these diseases, phthisis falls below the average of the five past summers, whilst the three other diseases are nearly double of it. But if the mortality be great, so is the rate of increase of population, for in the three weeks severally, there were born, 1232, 1223, and 1295.—*Lancet*.

A Treatise on Fractures in the Vicinity of the Joints, &c., by Robert William Smith, M.D., M.R.I.A., &c., has just been published in London.